



and a completely trusted Agency contract employee of 10 years standing. According to [redacted] had been selected concerning many operations at the highest levels and was the ideal choice for interpreter-interpreter in the [redacted] East because of his unique language ability, his very excellent interpretation methods and direct personal knowledge of the case itself. After consideration of all the facts and with the agreement of both [redacted] and [redacted] from an operations point of view, the writer accepted [redacted] as interpreter-interpreter but denied him access to technical details of ARFICALL.

5. Technical matters in the cases of [redacted] were entirely handled by [redacted] using equipment obtained from [redacted]. Full tape recordings were made of all cases. Tapes were turned over to the case officers involved upon completion of each case. In addition, [redacted] assembled a two-way-transmission and reception unit which was used during the cases and which enabled [redacted] and the writer) to be kept abreast of the interrogations as they were carried on by the interrogators and/or case officers.

6. For matter of record, it should be noted that technical equipment [redacted] is in poor condition and needs much repair and overhaul. This is not the fault of [redacted] but is apparently due to a lack of a technical specialist [redacted]. In view of this [redacted] the writer recommend a small, compact unit (probably battery-powered) be designed and assembled for special use in connection with ARFICALL work and that it be sent to [redacted] where it can be held in a ready status for future work.

7. Cover for the actual ARFICALL operation followed standard methods. Each subject was told in general terms that they were to be used on further work but that policy demanded persons going on assignments be tested physically and psychologically for our protection as well as theirs. Hence, a complete physical and psychiatric-psychological examination was required. These examinations were then in each case carried out by [redacted] and [redacted]. All subjects readily accepted this radical cover and the ARFICALL technique was introduced easily and with full consent of the subjects. It should again be noted here in the record that these physical/ps,chiatric examinations are very valuable for several reasons:

- a) descriptive and radical and psychiatric picture of the subject and aid in assessment of his physical and mental capacities.
- b) A subject's story is re-introduced from a new angle and often important back ground material comes up in the examination.



roughly this point until 1:02 P.M., when the interview ended. A T-1000  
techniques were applied. These techniques, which followed a previously  
agreed upon plan were in three stages:

- A B/3
- a) A summary in which [redacted] details were covered briefly  
although professional opinion reflects that subject had  
little control. First, thirty to forty minutes.
- B/3
- b) A summary in which [redacted] details were very good and confirmed basic material. This,  
forty to fifty minutes.
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- c) Followed development of identification as described above.  
subject was interpreted directly [redacted] confirming  
again good, significant material was confirmed and from a  
professional view, subject had little control. First, thirty  
to forty minutes.

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7. On Saturday, 28 August 1954, at 10:00 A.M., a formal conference  
was held in [redacted] office and the area residence. [redacted] stated  
that results were satisfactory that subject had given the general impression of  
the truth with some unexplained details. [redacted] requested confirmation of  
names, codes, legends with some new information developed. [redacted] also  
pointed out that of extreme interest and significance to him, was that  
subject while under APTIC had spoken highly of the Russians. This  
conference concluded at 10:25 A.M.

A B/3

8. At 11:00 A.M., the same morning, both doctors and [redacted] had a  
final interview with subject. Subject's condition was not as satisfactory,  
only complaint being a headache. Subject spoke of dreams (see  
[redacted] report) and in general appeared somewhat confined in regard  
to the previous day's activities but no autoneurosis was noted. Tests were  
not run to check amnesia. Subject spoke of having a "feeling of satisfaction"  
and reiterated a willingness to do anything for us and of having [redacted]  
The interview was concluded at 11:45 A.M. and [redacted] returned to  
station headquarters at 12:30 P.M. For the record, it should be noted  
that subject was informed at the conclusion of this interview that all  
tests and examinations were finished; that we were now convinced he had  
told us the truth and that a "favorable" report would be made to "higher  
authorities" on his behalf. It should also be noted, in response to a  
request for [redacted] that the team agreed that there could be  
no objection, who operational use of the subject including returning  
subject [redacted]

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PAGE 2

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1. Following standard procedure and prior to the start of the techniques, a full discussion was held by all participating personnel concerning this case on Saturday, 28 August 1954. Details of the procedure, a general time schedule and necessary operating instructions were worked out. Specific briefing was handled by [redacted] Staff Officer, who acted as interpreter-interpreter throughout.

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2. The subject, [redacted] He has appeared under interrogation and polygraph techniques. As a result, subject attempted suicide by hanging. Subsequently, he again had been polygraphed after long interrogation and had nearly collapsed. [redacted] described his condition at this time as dazed and suffering from shock. Later, another polygraph test had been attempted but either because of extreme nervousness or tension results were erratic and useless.

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3. On Sunday, 29 August 1954, at 8:00 P.M., [redacted] and [redacted] with [redacted] an interpreter began a combined physical-psychiatric examination. This examination was concluded at 11:47 P.M. [redacted] described subject as physically "normal." During the course of the examination, subject related with "lateral" details of his personal and life story. He appeared frank, unemotional and fully co-operative. [redacted] described subject as a "very dependent individual" at this time.

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4. On Monday, 30 August, at approximately 10:00 A.M., after explaining the necessity of further examination to subject at conclusion of the previous day's examination, actual A.M.T. treatments were commenced. First injection was made at 10:30 A.M. and subject went rapidly into a sound sleep. (See [redacted] report). Subject, however, after a short period of time and after stimulation reached nearly to the treatment and two attempts to introduce phantoms were unsuccessful. Subject then continued to resist treatment although waking doses were given until approximately 11:15 A.M. when additional injections produced a satisfactory state and [redacted] opened up with direct interrogation. This interrogation which lasted about forty to forty-five minutes produced satisfactory information of a confirming nature. [redacted] stated that in his professional opinion this induction was satisfactory and [redacted] confirmed the accuracy of the subject's statements at this time. The session concluded at 11:47 P.M.

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5. At 1:15 P.M., [redacted] and [redacted] held a second, follow-up interview with the subject. This concluded at 1:45 P.M. and one hour was terminated.

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6. At 2:30 P.M., all participating personnel discussed the case in the office of [redacted] from conclusions, based on the professional



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continued to insist that [redacted] had been with him in the store and must  
be somewhere near that. The subject was informed that [redacted] that he  
had tricked him and that he would be returned to his cell. After  
the subject, although still confused, accepted his situation and  
that he had deceived [redacted] and agreed to be moved by his associates.

The case was concluded at about 1600. [redacted] and [redacted] checked subject's condition and found it satisfactory. (Medical report indicates previous heart condition.)

On Wednesday, 1 September 1974, a closed conference was held with [redacted] and [redacted] of the FBI. [redacted] discussed and results turned out highly satisfactory and important. The A [redacted] form, based on the observed results of the treatment and on the professional opinion of [redacted] and [redacted] interposed no objections to a rational use of subject in returning him to the [redacted] [redacted]. In addition, several matters involving all cases were discussed and results were reviewed.

2. It should be noted here that all of the above cases were handled under strict drug techniques--forensics or narcotics--and not a "beat" file was added even for the basic complaint of "drugs" and/or "drugs" were pressed for time and b) there were no [redacted] officers available or present at [redacted] and were in fact [redacted] in barracks.

10. At the conclusion of the work at [redacted] the ARDIBO officers turned to [redacted] the requestability of the use of the ARDIBO. After a careful examination of all details available in these cases, EIL-CHUBI, Lenzbank was denied on both medical and security grounds. Thereafter on Saturday, 9 September, after studying the above cases on Thursday and Friday, the ARDIBO, Team left the area.

[illegible]

## MELISSA C. GREGG



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B/6 2. The efforts of [REDACTED] to handle the [REDACTED] aspects of the [REDACTED] case with very little opportunity for promotion deserves commendation.

A 3. The AMERICAN team again wishes to thank the [REDACTED] for their complete support in this operation. The rapid [REDACTED] work which is the basis for the AMERICAN operations was carried out with remarkable success by [REDACTED] In these cases, because of the understanding and capabilities of [REDACTED] and [REDACTED] cover was perfectly developed. Support was rendered with the subjects and cases were rapidly, smoothly and profitably handled. It is particularly worthy of comment that on very short notice, [REDACTED] not only authorized participation of [REDACTED] but also [REDACTED] to the operation with resultant loss of his services to urgent medical problems in the operations area. G

A 4. In connection with the above, the writer recognizes that [REDACTED] official communication as addressed to [REDACTED] in appreciation of his efforts on behalf of the AMERICAN operations and his high motivation in interrupting a pleasure trip, at great inconvenience to himself and his wife to assist the Agency in urgent work.

A [REDACTED]

[REDACTED]

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ADULTHOOD MEDICAL REPORT

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by [REDACTED]

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CONFIDENTIAL

1. Subject is

A [redacted] thoroughly examined since March. He was taken to hospital [redacted] and the interrogator on 25 August. Subject was first examined at the 6 o'clock on the afternoon of 26 August. He appeared calm, cooperative, composed freely, and gave further evidence of tension in that his blood pressure was elevated. As a preliminary step, the [redacted] medical consultant performed a physical examination which revealed no evidence of abnormality. Subject was cooperative during this procedure but displayed increasing evidence of tension. The examination was conducted through the interrogator acting as interpreter. There were no problems during this part of the examination. The results of the material listed or already discussed will not be recalled.

2. It was my impression during the entire first examination that

B/6 Subject was very guarded but not particularly evasive. He responded readily to questions without hesitation and became emotional on only one occasion, which was in regard to thoughts about [redacted]. He was able to discuss [redacted] without much evidence of emotion. He kept himself well in hand, and in his first examination there were very few, if any contradictions which I could detect. It should be noted, however, that it was very difficult to get him to discuss anything pertaining to himself. He appeared freely [redacted] and asked if he could be discussed. At the slightest provocation, he would burst into laughter and would not discuss [redacted]. But in regard to personal matters he was very guarded and less verbose. The interview was terminated after three hours.

3. The next morning, 27 August, at approximately nine o'clock the

interview was resumed. In a personal matter was elicited during this interview, none of which seemed to be particularly pertinent. His biological knowledge has been discussed and found to be very broad. His classification, for example, of living beings as plants, animals, but I don't believe that this has any great significance because he was [redacted] or he himself had had no biological training but had been merely told that he could teach the subject and was teaching from a textbook.

4. He mentioned "scholastics" on one occasion, but it developed

that he had no knowledge of scholasticism except that it had to do with the stupidity of scholastic philosophers while having a course in the history of education. His concept of God and religion was discussed. He stated that on one occasion he had been asked to say [redacted] but his knowledge in this area is also very shallow and insufficient. It is of interest to note that he has no knowledge [redacted]

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[redacted] and that he completely rejects, on the basis of [redacted] authority the source of which is not clear, the [redacted] He studied psychology during a course [redacted] but was not in a theory of behavior and was given a classification of personalities which dates back at least a hundred years.

5. In the area in which we employed, he seemed to have no specialized knowledge. This is in conformity with his statement that [redacted] The examination was terminated at twelve o'clock with the statement to the patient that it would be necessary to make some more psychological tests before we could conclude this part of the examination. He expressed willingness to cooperate and the relationship during the entire morning was considered good.

6. At 2:15 p.m. Subject was told that we had noted a number of occasions that his blood pressure was elevated and that before continuing the examination, we desired to have him relaxed, even if it were necessary to give him some medicine to bring about such relaxation. He was asked to recline on a bed. His initial blood pressure was 140/95. After ten minutes of conversation, his blood pressure dropped to 140/80, but his pulse which was originally 120 was still the same. He was told, therefore, that we would have to draw some blood in a effort to lower his pressure. He accepted this readily and stated that "he could be willing to give all five liters of his blood" if the Americans asked him to. The [redacted] G medical consultant used a 20-gauge needle to enter his left antecubital vein and made an initial injection of 3cc of 2 percent solution. Almost immediately Subject commented upon a feeling of relaxation which increased with the injection of 2cc more of the solution. Shortly after which, he complained of light-headedness and a feeling of drowsiness. The injection was continued slowly at the rate of about 1cc per minute, until 20cc of the solution had been given, at which time Subject was sound asleep. Through the same needle, he was given 2cc of the second solution. There was no immediate response to this.

7. According to the previously adopted plan, the interrogator was supposed to induce the fantasy that he was [redacted] B/3 code officer. This attempt was made as Subject gradually returned to a responsive state. At this point, we have somewhat of a difference of opinion. It is my feeling, on the basis of the interrogation which I was receiving, that the interrogator succeeded in some measure in this effort. The interrogator, however, feels that Subject identified him as himself almost immediately. However, the consideration as to whether this was an act which would result in an apprehension of Subject were certain of his interrogation. For approximately thirty minutes, Subject was in a good state of detachment, and to say

believe that he had very little control during this period. After thirty minutes, his control gradually returned to the extent that he recognized a fourth party in the room, whereas before there had been only three.

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3. Before complete recovery, he was given another injection of the first solution over a period of five minutes, consisting of 1cc. He had another good initial response and this time the interrogator initiated a friend. This response was exceptionally good and he reacted to with a good initial response of interest to his interrogator. This response remained very good for approximately thirty-five minutes. During this session also, the interrogator thought that he had been recognized as himself, but this was proved erroneous by further developments and the interrogator himself recognizes that the man was living actively in his fantasy. Everything which was said was appropriate to the circumstances. The content is on the recordings of the interview.

4. After forty-five minutes, he again began to control himself well, and he was given an intra-muscular injection of 1cc of the second solution followed in ten minutes by 1cc of the first solution. His response was again good and the interrogation proceeded with direct interrogation. It was considered that during the first thirty minutes of this session, Subject had little control. His final blood pressure was 120/80.

10. It is my overall impression that from a psychological standpoint, it was a satisfactory interview. For approximately thirty minutes at the beginning of each of the three sessions of the procedure, there was good detachment from reality and loss of control. There are two things, however, that need clearing up, neither one of which is probably very important. At one time Subject stated emphatically that he would like to [redacted] to the best of our knowledge, he is not [redacted]. The second point is that he given a number of [redacted] utterances, as I understand from the interrogator, the story checks "almost too perfectly." It is my own impression, based on the total observation, that in the areas which were covered, Subject was telling the truth.

11. At a final interview on 26 August, conducted with the same case officer, Subject complained of a headache and related a rather involved dream in which he was in [redacted] having the feeling that he had recently come there [redacted]. He was looking at the train schedule to try to find the train [redacted] he was off, while in finding this out, he finally did locate it at the end of the list rather than where it would have been. While he was standing looking at the sign, one of his former case officers

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appeared, while he [redacted] he [redacted] on all [redacted] whether he should  
and him out. The case officer appeared to become extremely small  
and then rose to rather [redacted] proportions. He [redacted], however,  
to [redacted] him subsequently. While this was [redacted], another case  
officer replaced the first [redacted] then he [redacted]. [redacted] in regard  
to the whole [redacted] that should be mentioned is that he [redacted] a very  
superior attitude toward all [redacted] who were [redacted] around the  
station. In reference to the interpretation, he mentioned that [redacted]  
indicated the [redacted] of his life when he [redacted], and he had spent  
a good deal of his life [redacted] and that the case officer who  
grew small and then large produced the [redacted] of an experience  
of the previous afternoon when he thought he saw a fourth person in  
the room who was very tall and dark in appearance. He [redacted] attempt  
was made to test his [redacted] for the events of the preceding day.  
but one has the impression that he has [redacted] feelings in regard to  
it with confusion in his own mind as to how real any part was.

12. He was [redacted] that our tests were finished, that we  
were convinced that he had told the truth, and that we would recommend  
to higher authorities that he be given greater [redacted].

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1. Subject is [REDACTED] He appeared to be cooperative and on the 10th of August, which was held on 27 August from two o'clock until five o'clock, his life history was discussed. Since his history has been previously recorded, no comments will be made about this. His speech was free, unguarded, and frank. He very definitely gives the impression of an individual who, while somewhat respectful of authority, is quite acquiescent to it. He is a somewhat individual and, although having a fair education, he has no great insight and tends to parrot much of his learning.

2. He was treated on the morning of 30 August, starting at 10:00. His blood pressure was 130/10. A complete physical examination had been done the day before which was entirely normal. He was given 20cc of the first solution and went soundly to sleep. After donning the armbands in the room, he was awakened and an attempt was made to induce a phantasy of a friend but he was unable to return. [REDACTED] This was unsuccessful. He immediately interrupted himself and was quite aware of his surroundings. Being advised that this attempt was unsuccessful, he was slowly given 15cc more of the first solution, followed by 1cc of the second solution. [REDACTED] He then a phantasy was still unsuccessful. He drifted into ideological discussions along with a good deal of self-condemnation conversation. Although he was influenced by the injections and was more verbose and more frank, this was not considered a very satisfactory phase.

3. About 11:15, the injection of the 20cc of the first solution was started and, in an effort to overcome the difficulties encountered in the first phase of the examination, this was given continuously instead of intermittently. With this type of injection, a rather satisfactory comatose state for interrogation was obtained. The case officer then proceeded with a regular interrogation. At the termination of the interrogation, he was given 1cc of the first solution. Until the interview was terminated, he continued to speak freely and frankly and was much less guarded than he had been before. The last forty-five minutes of this phase was considered satisfactory.

4. In summary, Subject seemed to be a depressed, emotionally unstable, somewhat idealistic [REDACTED] who has made one suicidal attempt of serious proportion and who is well educated. He believes that he is abstracted, although he appears to be superficially pleasant and happy. There is a good deal of depressive material close to the surface. He does not have an agenda for the program, but he knows nothing about it except that he was told some blood would be drawn. He readily recognizes by the effects that he was given something.

in addition to the drawing of blood, but he does not know how many solutions were used or of what nature. He asked if a narcotic had been given and he was told that it was merely a weak solution used in psychological testing. He questioned my identity as a physician a number of times although he accepted the [redacted] as a genuine physician. His final conclusions seemed to be that I was some sort of psychologist. It is my opinion, after the total examination, that Subject is probably telling the truth. G

5. I seriously question his value as a reliable source. His inexperience makes him grasp for the nearest authoritative source on which he can lean. His doing this at the present time with us indicates that he is just as likely to do so if he encounters the British. This does not indicate that he is not telling the truth now, but that he would probably also tell the truth upon his return. We consider his operational potential nil, except perhaps to return to his homeland with a good deal of pseudo information.



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1. Examination was conducted on 31 August 1954 in the same location as Cases No. 1 and 2. The examination started at 10:30 a. m., was interrupted for lunch at 1:00, was resumed at 2:00, and the treatment started at 3:35. In the initial examination, the pertinent factors in the case were reviewed. These are recorded elsewhere and will not be repeated. It was decided to attempt to induce a phantasy of a meeting between Subject and [redacted]. The induction was started at 3:35 and Subject was given 1cc of the first solution, at which time a substitution was made in interrogators and in place of [redacted]. He had previously conducted the examination, [redacted] speaking interrogator, [redacted] took his place. As Subject aroused, [redacted] started a discussion in [redacted]. The phantasy was rapidly and vividly induced, Subject clinging to his old friend and attempting to find out his present address and what he had been doing since [redacted] which was the last contact Subject had had with him. In order to be certain that the situation was kept under control, Subject was given a continuous injection, receiving over the next hour 25cc of the first solution (a total of 40cc). After all pertinent information had been obtained, sleep was induced to break off the phantasy. This was done with difficulty, however, because when Subject aroused, he insisted that [redacted] had been [redacted]. As he was more completely aroused, he recognized the impossibility of this and began to joke about the fact that he had dreamed so vividly. When he did arouse, the situation had been returned to normal and [redacted] had taken the place which he occupied at the beginning.

2. None of Solution No. 2 was given because Subject's history reveals susceptibility to anti-epileptics which he has had for about two years. In view of his negative physical examination, it was decided safe to proceed with the treatment. His physical condition at the end of the procedure was good except for a slight feeling of being drunk; he was fully aroused and talking clearly.

3. This treatment was highly successful from a strictly professional viewpoint. The phantasy was vivid and quickly induced. It was maintained as long as the interrogator desired and had to be terminated by induction of sleep.